

**Washington State Department of Transportation and  
Washington State University  
Truck Traffic Survey, Summer 1993**

- 1) Station Location:
- 2) Name of Interviewer \_\_\_\_\_
- 3) Interview shift:
1. Day Shift                      2. Evening Shift                      3. Night Shift  
6:00 a.m. - 2:00 p.m.      2:00 p.m. - 10:00 p.m.      10:00 p.m. - 6:00 a.m.
- 4) Time of interview: \_\_\_\_\_ a.m.                      \_\_\_\_\_ p.m.
- 5) Is this truck a part of the "official sample"?      1) ☐ Yes                      2) ☐ No

*[Site supervisor will provide instructions concerning which trucks are part of the official sample.]*

<b>6) Truck Configuration</b> <i>[Check only one]</i>	<b>7) Trailer Style</b> <i>[If appropriate, check more than one]</i>
1. <input type="checkbox"/> Straight truck 2. <input type="checkbox"/> Truck and trailer 3. <input type="checkbox"/> Tractor only 4. <input type="checkbox"/> Tractor and trailer 5. <input type="checkbox"/> Tractor with two trailers 6. <input type="checkbox"/> Other (specify) _____	1. <input type="checkbox"/> Van (without temperature control) 2. <input type="checkbox"/> Van with temperature control 3. <input type="checkbox"/> Flatbed 4. <input type="checkbox"/> Car carrier 5. <input type="checkbox"/> Hopper 6. <input type="checkbox"/> Stake and rack 7. <input type="checkbox"/> Concrete mixer 8. <input type="checkbox"/> Tanker 9. <input type="checkbox"/> Float 10. <input type="checkbox"/> Dump 11. <input type="checkbox"/> Container 12. <input type="checkbox"/> Chip 13. <input type="checkbox"/> Animal Carrier 14. <input type="checkbox"/> Logging 15. <input type="checkbox"/> Other (specify) _____

- 8) Total number of axles on the ground: \_\_\_\_\_
- 9) Is a hazardous material placard displayed?    1) ☐ Yes ID# \_\_\_\_\_    2) ☐ No

- 10) Carrier name: \_\_\_\_\_
- 11) Carrier home base: \_\_\_\_\_
- 12) Approximately how much time did you spend at this weigh station? \_\_\_\_\_ minutes
- 13) What is the unloaded weight of this vehicle?  
 \_\_\_\_\_ lbs. [OR] \_\_\_\_\_ kgs.
- 14) What is your estimated payload weight?  
 \_\_\_\_\_ lbs. [OR] \_\_\_\_\_ kgs.
- 15) What is the major commodity on board: \_\_\_\_\_

Trucks CARRYING cargo:	Trucks WITHOUT cargo:
Where did you pick-up this cargo?	Where did your trip without cargo originate?
16) City/State/Province: _____	20) City/State/Province: _____
17) Facility:	21) Facility:
1) <input type="checkbox"/> truck terminal	1) <input type="checkbox"/> truck terminal
2) <input type="checkbox"/> rail terminal	2) <input type="checkbox"/> rail terminal
3) <input type="checkbox"/> marine terminal	3) <input type="checkbox"/> marine terminal
4) <input type="checkbox"/> air terminal	4) <input type="checkbox"/> air terminal
5) <input type="checkbox"/> factory	5) <input type="checkbox"/> factory
6) <input type="checkbox"/> warehouse/distribution center	6) <input type="checkbox"/> warehouse/distribution center
7) <input type="checkbox"/> farm	7) <input type="checkbox"/> farm
8) <input type="checkbox"/> point of sale/consumption	8) <input type="checkbox"/> point of sale/consumption
9) <input type="checkbox"/> other _____	9) <input type="checkbox"/> other _____
What is the destination of your cargo?	What is your current destination?
18) City/State/Province: _____	22) City/State/Province: _____
19) Facility:	23) Facility:
1) <input type="checkbox"/> truck terminal	1) <input type="checkbox"/> truck terminal
2) <input type="checkbox"/> rail terminal	2) <input type="checkbox"/> rail terminal
3) <input type="checkbox"/> marine terminal	3) <input type="checkbox"/> marine terminal
4) <input type="checkbox"/> air terminal	4) <input type="checkbox"/> air terminal
5) <input type="checkbox"/> factory	5) <input type="checkbox"/> factory
6) <input type="checkbox"/> warehouse/distribution center	6) <input type="checkbox"/> warehouse/distribution center
7) <input type="checkbox"/> farm	7) <input type="checkbox"/> farm
8) <input type="checkbox"/> point of sale/consumption	8) <input type="checkbox"/> point of sale/consumption
9) <input type="checkbox"/> other _____	9) <input type="checkbox"/> other _____
[Go to Question 24]	[Go to Question 24]

- 24) Please identify Washington highways used to travel from above listed origin to cargo destination on attached map.
- 25) Over the past seven days, how many other times has this truck traveled the route identified on the attached map? \_\_\_\_\_ ☐ Don't know

**THANK YOU FOR YOUR TIME**

**WSU/WSDOT Canadian Border  
Southbound Passenger Car Interview Form**

1. Location: \_\_\_\_\_
2. Interviewer: \_\_\_\_\_
3. Time of interview: \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.
4. Is this vehicle a part of the official sample?       yes       no
5. Type of vehicle:    1) ☐ car    2) ☐ car with trailer    3) ☐ RV    4) ☐ light truck
6. Number of passengers: \_\_\_\_\_
7. Where do you live? City/State/Province: \_\_\_\_\_

**Questions for U.S. Residents**

8. Where in Canada did this trip begin today?  
City/Province: \_\_\_\_\_
9. Why were you in Canada?  
 1) ☐ Recreation  
 2) ☐ Work/business  
 3) ☐ Shop  
 4) ☐ Eat  
 5) ☐ Visit friends/family  
 6) ☐ Delivery  
 7) ☐ Pick-up  
 8) ☐ Other: \_\_\_\_\_
10. What is your primary destination today?  
City/State: \_\_\_\_\_
11. Why are you traveling to this destination?  
 1) ☐ Return home  
 2) ☐ Recreation  
 3) ☐ Work/business  
 4) ☐ Shop  
 5) ☐ Eat  
 6) ☐ Buy gas  
 7) ☐ Visit friends/family  
 8) ☐ Delivery  
 9) ☐ Pick-up  
 10) ☐ Other: \_\_\_\_\_
12. What Washington highways will you use from this border station to your destination today? (*highlight on attached map*)
13. How many times do you typically travel through this station in a month?

**Questions for Canadian Residents**

14. Where in Canada did this trip begin today?  
City/Province: \_\_\_\_\_
15. What is your primary destination today?  
City/State: \_\_\_\_\_
16. Why are you traveling to this destination?  
 1) ☐ Recreation  
 2) ☐ Work/business  
 3) ☐ Shop  
 4) ☐ Eat  
 5) ☐ Buy gas  
 6) ☐ Visit friends/family  
 7) ☐ Delivery  
 8) ☐ Pick-up  
 9) ☐ Other: \_\_\_\_\_
17. What Washington highways will you use from this border station to your destination today? (*highlight on attached map*)
18. Approximately how many times do you typically travel to this destination in a month?  
\_\_\_\_\_